

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

New Prosperity Foundation; The

ADDRESS (number and street)

200 S Wacker Dr

Suite 4000

☐ Check if different
than previously
reported. (ACC)

Chicago

IL

60606

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00488494

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report(Q1)
- ☐ July 15
Quarterly Report(Q2)
- ☐ October 15
Quarterly Report(Q3)
- ☐ January 31
Quarterly Report(YE)
- ☐ July 31 Mid-Year
Report(Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☒ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12G)

Election on

11

02

2010

in the
State of(d) 30-Day
Post -Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

in the
State of

5. Covering Period

10

01

2010

through

10

13

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Gregory Baise

Signature of Treasurer

Electronically Filed by Gregory Baise

Date

07

25

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
New Prosperity Foundation; The

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	181151.06
(b) Cash on Hand at Beginning of Reporting Period	548913.38	
(c) Total Receipts (from Line 19)	970000.00	1527000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1518913.38	1708151.06
7. Total Disbursements (from Line 31)	662970.17	852207.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	855943.21	855943.21
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

New Prosperity Foundation; The

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	970000.00	1527000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	970000.00	1527000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	970000.00	1527000.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	970000.00	1527000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	970000.00	1527000.00

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	45500.00	156994.60	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	45500.00	156994.60	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	617470.17	695213.25	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ➤	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	662970.17	852207.85	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	662970.17	852207.85	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	970000.00	1527000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	970000.00	1527000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	45500.00	156994.60
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45500.00	156994.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New Prosperity Foundation; The

A.

Full Name (Last, First, Middle Initial)

Eby-Brown Company LLC

Mailing Address 280 Shuman Blvd

City

Naperville

State

IL

Zip Code

60566

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.4223

Amount of Each Receipt this Period

25000.00

B.

Full Name (Last, First, Middle Initial)

David G Herro

Mailing Address 65 E Goethe

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harris Associates LP

Occupation
Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.4220

Amount of Each Receipt this Period

125000.00

C.

Full Name (Last, First, Middle Initial)

Illinois Manufacturers

Mailing Address 1301 W 22nd St Ste 610

City

Oak Brook

State

IL

Zip Code

60523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.4218

Amount of Each Receipt this Period

250000.00

SUBTOTAL of Receipts This Page (optional)

400000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Prosperity Foundation; The

A.

Full Name (Last, First, Middle Initial)

Illinois Manufacturers

Mailing Address 1301 W 22nd St Ste 610

City

Oak Brook

State

IL

Zip Code

60523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.4233

Amount of Each Receipt this Period

250000.00

B.

Full Name (Last, First, Middle Initial)

Ricky Sandler

Mailing Address 1175 Park Ave Apt 14A

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eminence Capital

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.4227

Amount of Each Receipt this Period

75000.00

C.

Full Name (Last, First, Middle Initial)

Brian Simmons

Mailing Address 1500 Lake Shore Dr Apt 18A

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harris & Associates LP

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.4221

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)

335000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Prosperity Foundation; The

A.

Full Name (Last, First, Middle Initial)

Robert D Stuart, Jr.

Mailing Address 150 Filed Dr Ste 100

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
North Star Investments

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.4229

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Robert A Taylor

Mailing Address 312 Woodley Rd

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harris Associates LP

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.4231

Amount of Each Receipt this Period

25000.00

C.

Full Name (Last, First, Middle Initial)

Weaver Popcorn

Mailing Address 9850 W Point Dr Ste 100

City

Indianapolis

State

IN

Zip Code

46256

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.4225

Amount of Each Receipt this Period

200000.00

SUBTOTAL of Receipts This Page (optional)

235000.00

TOTAL This Period (last page this line number only)

970000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

New Prosperity Foundation; The

A.

Full Name (Last, First, Middle Initial)

Majority Strategies

Mailing Address 135 Professional Dr
Suite 104

City State Zip Code
Ponte Vedra Beach FL 32082

Purpose of Disbursement
Communications Consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4240

Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

6000.00

B.

Full Name (Last, First, Middle Initial)

Targeted Victory

Mailing Address 66 Canal Center Plaza
Suite 501

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement
Online & Mobile Communications Consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4234

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City State Zip Code
Springfield IL 62701

Purpose of Disbursement
Media Consultings

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4242

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

29500.00

SUBTOTAL of Disbursements This Page (optional)

45500.00

TOTAL This Period (last page this line number only)

45500.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 10 / 14

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The		FEC IDENTIFICATION NUMBER ▼ C C00488494	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Majority Strategies		Date MM / DD / YYYY 10 / 01 / 2010	
Mailing Address 135 Professional Dr Suite 104		Amount 145178.41	
City State Zip Code Ponte Vedra Beach FL 32082		Transaction ID: SE.4123	
Purpose of Expenditure Voter Contact Mail		Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: ALEXANDER GIANNOULIAS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 05 / 2010	
Mailing Address 220 E Adams St Suite 200		Amount 50000.00	
City State Zip Code Springfield IL 62701		Transaction ID: SE.4141	
Purpose of Expenditure Radio Advertising		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOSEPH SIMON MR. DONNELLY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		195178.41	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gregory Baise Signature		Date MM / DD / YYYY 07 / 25 / 2011	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 11 / 14

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The		FEC IDENTIFICATION NUMBER ▼ C C00488494	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 05 / 2010	
Mailing Address 220 E Adams St Suite 200		Amount 80000.00	
City State Zip Code Springfield IL 62701		Transaction ID: SE.4143	
Purpose of Expenditure Television Advertising		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOSEPH SIMON MR. DONNELLY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 06 / 2010	
Mailing Address 220 E Adams St Suite 200		Amount 12500.00	
City State Zip Code Springfield IL 62701		Transaction ID: SE.4138	
Purpose of Expenditure Radio Advertising		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: THOMAS ELDON HAYHURST		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		92500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gregory Baise Signature		Date MM / DD / YYYY 07 / 25 / 2011	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 12 / 14

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The		FEC IDENTIFICATION NUMBER C C00488494	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 06 / 2010	
Mailing Address 220 E Adams St Suite 200		Amount 13799.32	
City Springfield State IL Zip Code 62701		Transaction ID: SE.4140	
Purpose of Expenditure Voter Contact Phone Calls		Office Sought: <input checked="" type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: MARK STEVEN KIRK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 186720.81		2010	
Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 07 / 2010	
Mailing Address 220 E Adams St Suite 200		Amount 25000.00	
City Springfield State IL Zip Code 62701		Transaction ID: SE.4137	
Purpose of Expenditure Radio Advertising		Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JULIE LASSA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 25000.00		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		38799.32	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gregory Baise Signature		Date MM / DD / YYYY 07 / 25 / 2011	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00488494</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 0 7</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	
Mailing Address 220 E Adams St Suite 200		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">50000.00</div>	
City State Zip Code Springfield IL 62701		Transaction ID: SE.4149	
Purpose of Expenditure Radio Advertising		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BARON PAUL HILL		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">50000.00</div>	

Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 0 8</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	
Mailing Address 220 E Adams St Suite 200		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">144936.00</div>	
City State Zip Code Springfield IL 62701		Transaction ID: SE.4130	
Purpose of Expenditure Voter Contact Mail		Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: ALEXANDER GIANNOULIAS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">331656.81</div>	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">194936.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gregory Baise

Signature

Date

M M
0 7

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The		FEC IDENTIFICATION NUMBER ▼ C C00488494	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 08 / 2010	
Mailing Address 220 E Adams St Suite 200		Amount 16056.44	
City Springfield State IL Zip Code 62701		Transaction ID: SE.4192	
Purpose of Expenditure Voter Contact Phones		Office Sought: <input checked="" type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: MARK STEVEN KIRK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 347713.25		2010	
Full Name (Last, First, Middle, Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 11 / 2010	
Mailing Address 220 E Adams St Suite 200		Amount 80000.00	
City Springfield State IL Zip Code 62701		Transaction ID: SE.4139	
Purpose of Expenditure Television Advertising		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BARON PAUL HILL		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 130000.00		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		96056.44	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures		617470.17	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gregory Baise Signature		Date MM / DD / YYYY 07 / 25 / 2011	